on the invoice.

	DO NOT REMOVE FROM FILE	Contract No.: 162-9513-2
Agreement to Supply: EMPLO	OYEE VOLUNTARY BENEFITS PLAN	
This agreement, made and entered	into this the day of	, 2006, is by and between the CITY OF venue, Fort Lauderdale, FL 33301, hereinafter called
	an Family Life Assurance Co. of Columbus	(AFLAC)
Address: 1932 Wynnton Road	City: Columbus	State: GA Zip: 31999-0001
A Corporation 🗵 💢 A Partnership	o ☐ An Individual ☐ Other:	
listed above for a period of the \$553	SUTOF Proposal (RFP) for supplying the re-	pany" or "Contractor." Witnesseth that: Whereas, the quirements of the City for the items and/or service I that was accepted and approved by the City. October 17, 2006 Pur-10
Now, therefore, for and in considerati as follows:	ion of the premises and the mutual coven	ants herein contained, the parties covenant and agre
terms, covenants and conditions:		according to the following specifications,
 The Request for Proposal contain attachments forming a part of RFP N reference are made a part hereof. 	ning General Conditions, Special Condition umber இது இரு and the Contractor's pro	ns, Specifications, addenda, if any, and other oposal in response, form a part of this contract and b
b. In construing the rights and obligat be as follows:	tions between the parties, the order of pric	ority in cases of conflict between the documents shal
1) This contract Form G- 2) The City's RFP and all 3) Contractor's proposal i		
larbbuer to me city snan temam fully i	in accord with the specifications and be of I to be defective or does not conform to s	erein warrants that the product and/or service that is f the highest quality. In the event any product and/or pecifications the City reserves the right to cancel that
d. Cancellation: The City may cance of furnishing the products and/or services.	I this contract upon notice in writing shoul ces as specified herein upon 30 days writ	d the Contractor fail to reasonably perform the service ten notice. This applies to all items of goods or
e. Taxes Exempt: State Sales (#16-0 certain transactions are taxable. Cons	03-196479-54C) and Federal Excise (#59- sult your tax practitioner for guidance whe	-600319) Taxes are normally exempt, however, re necessary.

f. Invoicing: Contractor will forward all invoices in duplicate for payment to the following: Finance Department, 100 N. Andrews Avenue, 6th Floor, Fort Lauderdale, FL 33301. If discount, other than prompt payment terms applies, such discount MUST appear

2. Contract Special Conditions: Th	e following special conditions are m	ade a part of and modify the standard provisions contained
m the KFP.		
The following paragraph replaces the	e paragraph set forth in Section 20 o	f Part III - Special Conditions, of the RFP:
AFLAC agrees to protect, defend, inc against any and all claims, judgment connection with AFLAC insurance po from (i) the failure of AFLAC to comp	lemnify, and hold harmless the City s, suits or actions at law, including a licies ("Policies") issued to the emplo ly with the provisions of the issued P	and the City's officers, employees, and agents, from and ny award or attorney fees and any award of costs, in byees of the City through the payroll account which result olicies; or (ii) a coverage or claim dispute
between a City employee and AFLAC and pay the premium due; or (iii) a colority's remittance of a City employee's dispute between a City employee and for any of the Policies to AFLAC as a to claims arising out of or related to a State and Federal laws. AFLAC shall subject to the City's approval. This Agreement and AFLAC shall subject to the City's approval.	with respect to the coverage provide verage or claim dispute between a compared payroll deduction for a premium for AFLAC related to the City's failure fresult of events or circumstances being criminal misconduct by the City of defend and/or settle such claims are greement shall not create any third presents.	ed under Policies issued to those employees who apply for City employee and AFLAC related to the timeliness of the rany of the Policies to AFLAC; or (iv) a coverage or claim to remit a City employee's payroll deduction for a premium eyond the City's control. This hold harmless shall not apply r related to the City's responsibilities under any applicable and lawsuits at AFLAC's own expense, legal counsel being party rights.
are deleted.		in Section 28 of Part III - Special Conditions, of the RFP,
The City is to be added as an "addition the City as "additional insured" will be	nal insured" with relation to General at the contractor's expense.	Liability and Automobile Insurance. Any costs for adding
In the event that you are the successful for both General Liability and Automol	of bidder, you will be required to provide.	ride a certificate naming the City as an "additional insured"
The following paragraph is inserte Special Conditions, of the RFP:	d before the line "Certificate holder	should be addressed as follows:" in Section 28 of Part III -
The Contractor shall provide to the Cit following coverage:	y of Fort Lauderdale a Certificate of	Insurance for Professional Liability insurance showing the
Limits: \$1,000,000 per occurrence \$2,000,000 aggregate with def	ense costs in addition to limits	
3. Contract Summary:		
a. Attachments:		
American Family Life As document	surance Company of Columbus (AFLAC)'s response to the RFP and a copy of the RFP
b. Insurance: Yes ☑	No 🗍	
c. Performance Bond/Lette	er of Credit: Yes 🔲 No 🗹	
d. Procurement Specialist	s Initials: MW	
4. Contractor's Phone Numbers:	Toll Free: 1-800-992-3522	Office: 706-660-7452
5. Contractor's Fax Number:	706-320-4659	
	Transport Aller & Comment of the	
6. Contractor's E-Mail Address:	knipallister@affac.com	Website: www.aligo.com

4. 5. 6.

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City of For	t Lauderdale	
Ву:	Director of Procurement Services (City Manager's Designee)	
Date:	Auth: Sec. 2-180(8) of Code and Procurement Memo No. 04-03	
Date:	Assistant City Attorney (approved as to form)	
Contracto	r/Vendor	
By: Títle:	Jason Goodroe Name of Company Officer (please type or print) Authorized Officer's Signature 2nd V.P., Sales Administration	
Date:	11/16/06	
Attest:	Joey M./Loudermilk Secretary (please type or print) Signature of Secretary	

CERTIFICATE OF INSURANCE

RE: Agreement Between the City of Ft. Lauderdale and American Family Life Assurance Company of Columbus (Aflac). Contract No.: 162-9513-2

1 . .

Now Comes American Family Life Assurance Company Of Columbus (Aflac) and hereby certifies to the City that Aflac is self insured for Professional Liability to the extent required by Paragraph 2 of the above referenced Agreement. This certification creates no third party rights. Attached hereto and made a part of this certification is a copy of the most current Audited Financial Statement of Aflac Incorporated. This Certification is hereby made a part of the Agreement by this reference.

Jefferson W. Willis

Vice President, Senior Associate Counsel

Legal Division

Date: Novemberly 2006